Hand-enter Your Transmittal Number -

Transmittal Number

Your unique Transmittal Number can be accessed online: http://www.state.ma.us/scripts/dep/trasmfrm.stm or call DEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection

Transmittal Form for Permit Application and Payment

print. A separate	A. Permit Informati	on			
Transmittal Form	BRP WM 08 A		N	PDES Stormwater	r Ganaral Parmit
must be completed		acter code from permit instructions	- 14 N:	ame of Permit Categor	y General Permit
for each permit	Permit Code: 7 or 8 character code from permit instructions Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Type of Project or Activity B. Applicant Information — Firm or Individual City of Salem Name of Permit Category Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Type of Project or Activity B. Applicant Information — Firm or Individual City of Salem Name of Firm - Or, if party needing this approval is an individual enter name below: Street Address Salem City/Town Street Address Salem City of Salem Name of Individual 120 Washington Street, 4 th Floor Street Address Salem City/Town Street Address Salem City of Salem Name of Permit Category Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Type of Project or Activity Applicant Information — Firm or Individual First Name of Individual 120 Washington Street, 4 th Floor Street Address Salem City/Town State City/Town Name of Permit Category Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Type of Project or Activity Applicant Information — Firm or Individual First Name of Individual 120 Washington Street, 4 th Floor Street Address Salem City/Town State City of Salem Name of Individual 120 Washington Street, 4 th Floor Street Address Salem City/Town Name of Firm Or Individual Requiring Approval City of Salem Name of Firm Or Individual DEP Facility Number (if Known) Address Wakefield Name of Pirm Or Individual Name of Pirm Or Individual Name of Pirm Or Individual Name of Individ	y vor Systems (MS4s)			
application.		wer Systems (MS48)			
2. Make your check					
Commonwealth of	s. Applicant inform	iation – Firm or indivi	auai		
Massachusetts and	City of Salem				
mail it with a copy	Name of Firm - Or, if part	y needing this approval is an indivi	dual ente	er name below:	
of this form to:					
			rst Name	e of Individual	MI
02211.		eet, 4 th Floor			
3. Three copies of					
this form will be				01970	(978) 745-9595 Ext. 321
needed.	-			•	Telephone # and extension
Copy 1 - the		, Director of Public Services			
original must	Contact Person		e-1	mail address (optional))
accompany your	. Facility Site or I	ndividual Requiring A	pprov	val	
Copy 2 must			.,- ,		
accompany your		ndividual	:::	- N - COLC >	
fee payment.	Name of Pacifity, Site of I	individual DE	=P Facilit	y Number (if Known)	Federal I.D. Number (if Known)
	Street Address		mail add	1000 (ontinent)	
records					
					Tolomboo # d d d
and avamat -	. <u>. </u>			•	Telephone # and extension
applicants must	. Application Prep	pared by (if different fr	om S	ection B)	
mail a copy of this	Metcalf & Eddy, Inc.				
		al			
4062, Boston, MA	30 Harvard Mill Squa	are			
02211					
E 5554 6 .	Wakefield	M	Α	01880	(781) 224-6626
Permit No	City/Town				Telephone # and extension
Rec'd Date	Robert Adams			·	
Reviewer	Contact Person	LS	P Numbe	er (21E only)	
F. Permit - Pr	oject Coordination				
ls this project subject to number - assigned who is an Environmental Im	o MEPA review? ☐ yes ☒ en an Environmental Notifical pact Report Required? ☐ ye	no If yes, enter the project's EOE	A unit:	EOEA file number	
			OI WIII DE	sought? I yes M	по
List any other DEP per	mits that apply to this project:	:			
Permit Category		Date of Submission (tentative of	or actual)	Transmittal #	if application already submitted
	· · · · · · · · · · · · · · · · · · ·			700	CTANCE
	·				, V22/21,
F. Amount Du	Α				PALM
				MUNI	יי.
Special Provision					
Hardship Reg	(city, town or municipal housing	ng authority)(state agency if fee is cording to 310 CMR 4.04(3)(c)	\$100 ог	less)	re no fee exemptions for 21E,
Alternative Sci	hedule Project (according to	310 CMR 4.05 and 4.10)		regardles	es of applicant status
Not Applicable		Not Applicable			
Check Number	o observanta e e o	Dollar Amount		Date	
riease mak	e crieck payable to the Co	ommonwealth of Massachusett DEP, P.O. Box 4062, Boston,	s and m MA 022	iail check and one c 211	opy of this form to:



BRP WM 08A NPDES Stormwater General Permit

Notice of Intent for Discharges from Small Municipal Separate **Storm Sewer Systems (MS4s)**

VVU4U844	
Transmittal Number	-

Facility ID (if known)

A. Instructions

Important: When filling out forms on the computer. use only the tab key to move your cursor - do not use the return key.





Submission of this Notice of Intent constitutes notice that the entity named at item B1. of this form intends to be authorized by the DEP General Permit issued jointly with EPA for stormwater discharges from the small municipal separate storm sewer system (MS4), in the location identified at item B2, of this form, Submission of the Notice of Intent also constitutes notice that the party identified at item B1. has read, understands and meets the eligibility conditions of Part I.B. of the NPDES Small MS4 General Permit, agrees to comply with all applicable terms and conditions of the NPDES Small MS4 General Permit, and understands that continued authorization to discharge is contingent on maintaining eligibility for coverage. In order to be granted coverage, all information required on BRP WM 08A, including the Stormwater Management Program Summary and Time Frames form, must be completed. Please read the permit and make sure you comply with all requirements, including the requirement to develop and implement a stormwater management program.

B. Applicant Information

1.	Small MS4 Operator/Owner Information:		
	City of Salem		
	Name		
	93 Washington Street		
	Mailing Address		
	Salem	MA	
	City/Town	State	
	(978) 745-9595 Ext. 201 Telephone Number	F	
	relephone Number	Email (if available)	
2.	Municipality Name		
	City of Salem		
	City/Town		
3.	Legal Status:		
	☐ Federal ☐ City/Town ☐ State	e 🔲 Tribal	☐ Private
	Other public entity: Specify Public Entity		
4.	Other regulated MS4(s) within municipal bound	aries:	
	Mass. Highway Dept. (Route 1A and 107)	·	
5.	Based on the instructions provided in Part I of t eligibility criteria for "listed species" and critical	he NPDES Small MS4 G I habitat been met?	eneral Permit, have the
	☐ yes ☐ pending ☐ no		
6.	Based on the instructions provided in Part I of t eligibility criteria for protection of historic prope	he NPDES Small MS4 G erties been met?	eneral Permit, have the
	☐ yes ☐ pending ☐ no	11, 3, 1 MB	NCE UNIT



BRP WM 08A NPDES Stormwater General Permit Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W040844	
Transmittal Number	
E- ID (C)	

Note: Section C may be duplicated to accommodate a larger list of receiving waters

C. Names of (Presently Known) Receiving Waters

Receiving Water:	No. of Outfalls*	Listed as Impaired?	Impairment
Danvers River	1		Pathogens
Name	Number	- ⊠ Yes □ No	Specify
			Unionized ammonia, organ
North River Name	17	- ⊠ Yes □ No	enrichment/low DO, and
Name	Number		pathogens. Specify
South River	7		Specify
Name	Number	- ☐ Yes ☒ No	Specify
			•
Forest River	18		Organic enrichment/Low I Flow alteration, other habi
Name	Number	- ⊠ Yes □ No	alterations, and pathogens
			Specify
Salem Harbor	14		Pathogens
Name	Number	- ⊠ Yes □ No	Specify
Beverly Harbor	14		Pathogens
Name	Number	- ⊠ Yes □ No	Specify
Name	Number	Yes No	Specify
Stormwater Manager Public Education: 1 BMP ID #	ment Progr	am Summary	
BIVIE ID#			Maintain and update website
Website	Dept. of Pub	olic Services**	(provided funding is available
Specify Best Management Practice	Responsible D	ept./Person Name	Specify Measurable Goal
2			
BMP ID#			
Informational brookures	Dont of Dec	dio Considera**	Provide and maintain
		olic Services**	brochures at SSCW office.
		olic Services** ept./Person Name	brochures at SSCW office. Distribute brochures at publi
Informational brochures Specify Best Management Practice			

^{** -} It is anticipated that assistance may be provided by Salem Sound Coastwatch (Refer to the attached letter).



BRP WM 08A NPDES Stormwater General Permit Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W040844 Transmittal Number

Facility ID (if known)

D. Stormwater Management Program Summary (Cont.)

3		
BMP ID#		
		Provide and maintain
Newsletter	Dept. of Public Services**	newsletters at SSCW office.
Specify Best Management Practice	Responsible Dept./Person Name	Mail newsletter to dues paying
		SSCW members and others
		on a quarterly basis (provided
		funding is available).
		Specify Measurable Goal
4		
BMP ID #		
		Post display annually at the
Public event displays	Dept. of Public Services**	Maritime Festival, and other
Specify Best Management Practice	Responsible Dept./Person Name	public events if possible
		(provided funding is available).
		Specify Measurable Goal
5		
BMP ID#		
Local newspaper articles	Dept. of Public Services**	One article per year.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
6		
BMP ID#		
		Annually (provided funding is
Training of volunteers	Dept. of Public Services**	available).
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
7		
BMP ID#		
		Year 1 – Publish upon receipt
Publish results of water quality	•	of results. Years 2 thru 5 -
monitoring	Dept. of Public Services**	Based on available funding.
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
Public Participation:		
Public Participation.		
8		
BMP ID #		
Water quality monitoring		Annually (provided funding is
program	Dept. of Public Services**	available).
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal

2.

^{** -} It is anticipated that assistance may be provided by Salem Sound Coastwatch (Refer to the attached letter).



BRP WM 08A NPDES Stormwater General Permit Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W040844 Transmittal Number

Facility ID (if known)

D. Stormwater Management Program Summary (Cont.)

BMP ID#

Beach cleanup program

Specify Best Management Practice

10 BMP ID#

Storm drain stenciling

Specify Best Management Practice

Salem State College

Responsible Dept./Person Name

Dept. of Public Services**

Dept. of Public Services**

Responsible Dept./Person Name

available).

3. Illicit Discharge Detection and Elimination:

11

BMP ID#

Develop GIS database of the

drainage system

Specify Best Management Practice

12

BMP ID#

Salem Sound Shoreline Survey

(Project No. 2002-01/604)

Specify Best Management Practice

13

BMP ID#

Visually inspect outfalls for dry weather flows

Specify Best Management Practice

BMP ID#

Conduct water quality sampling at stormwater outfalls

Specify Best Management Practice

Dept. of Public Services

Responsible Dept./Person Name

Health Dept.

Responsible Dept./Person Name

Dept. of Public Services**

Responsible Dept./Person Name

Dept. of Public Services** Responsible Dept./Person Name Specify Measurable Goal

Conduct once per year, each

summer (provided funding is

Evaluate once per year. Perform stenciling provided funding is available.

Specify Measurable Goal

Pending EOEA funding approval, begin digital mapping.

Specify Measurable Goal

Obtain copies of the quarterly progress reports, as well as, other information pertinent to Salem

Specify Measurable Goal

Inspect a representative number of outfalls annually (provided funding is available).

Specify Measurable Goal

Years 1 - Publish results of sampling. Years 2 thru 5 -Perform additional sampling (provided funding is available). Specify Measurable Goal

** - It is anticipated that assistance may be provided by Salem Sound Coastwatch (Refer to the attached letter).



BRP WM 08A NPDES Stormwater General Permit Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s) W040844

Transmittal Number

Facility ID (if known)

D. Stormwater Management Program Summary (Cont.)

15

BMP ID#

Conduct water quality sampling at beaches

Specify Best Management Practice

Health Dept.

Responsible Dept./Person Name

Perform weekly beach sampling during summer months in accordance with DEP criteria.

Specify Measurable Goal

<u> 16</u>

BMP ID#

Develop storm water

ordinance

Specify Best Management Practice

Dept. of Public Services

Responsible Dept./Person Name

Year 1 – Review existing bylaws & regulations; Year 2 – Propose changes; Year 3 – Implement changes, subject to City approval

Specify Measurable Goal

4. Construction Site Runoff Control:

17

BMP ID#

Develop an ordinance requiring developers to prepare an Erosion & Sedimentation Control Plan for all sites disturbing more than 1-acre.

Specify Best Management Practice

Dept. of Public Services Planning Board Conservation Commission

Responsible Dept./Person Name

Year 1 – Review existing bylaws & regulations; Year 2 – Propose changes; Year 3 – Implement changes, subject to City approval

Specify Measurable Goal

18

BMP ID#

Periodically check erosion control measures and construction material management on site inspections

Specify Best Management Practice

Dept. of Public Services
Planning Board
Conservation Commission
Responsible Dept./Person Name

Monitor and track violations
Specify Measurable Goal

19

BMP ID#

Develop an ordinance requiring storm water controls for all new and redevelopment projects disturbing more than 1-acre

Specify Best Management Practice

Dept. of Public Services
Planning Board
Conservation Commission
Responsible Dept./Person Name

Year 1 – Review existing bylaws & regulations; Year 2 – Propose changes; Year 3 – Implement changes, subject to City approval

Specify Measurable Goal



BRP WM 08A NPDES Stormwater General Permit Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

W040844

Transmittal Number

Facility ID (if known)

D. Stormwater Management Program Summary (Cont.)

20		
BMP ID#		
		Sweep streets between April 8
Street sweeping	Dept. of Public Services	Nov. (provided funding is
Specify Best Management Practice	Responsible Dept./Person Name	
		Specify Measurable Goal
21		
BMP ID#		
		Conduct sidewalk cleanup
	Dept. of Public Services	program each year for 1 week
Specify Best Management Practice	Responsible Dept./Person Name	in May (provided funding is available).
Dept. of Public Services Responsible Dept./Person Name Hold twice of Public Services Responsible Dept./Person Name Hold twice of Public Services	Specify Measurable Goal	
Street sweeping Specify Best Management Practice Specify Best Management Practice Clean Sweep Program Specify Best Management Practice Clean Sweep Program Specify Best Management Practice Dept. of Public Services Responsible Dept./Person Name Clean Sweep Program Specify Best Management Practice Catch basin cleaning Specify Best Management Practice Catch basin cleaning Specify Best Management Practice Dept. of Public Services Responsible Dept./Person Name Hold twice of Public Services Responsible Dept./Person Name		
10 #		Inanact weekless areas
Catch basin cleaning	Dent of Public Services	
. ,	treepended bepair creen rame	Specify Measurable Goal
23		
	Health Dept.	Weekly curbside pickup
Trash collection program		(provided funding is available).
Specify Best Management Practice	Responsible Dept./Person Name	Specify Measurable Goal
BMP ID#		
DP -		Bi-weekly curbside pickup
		(provided funding is available).
opecity best management Practice	Responsible Dept./Person Name	Specify Measurable Goal
25		
BMP ID#		
		Curbside pickup 5 times per
Yard waste program	Dept. of Public Services	year (provided funding is
Specify Best Management Practice	Responsible Dept./Person Name	available). Allow residents to
The second street sweeping pecify Best Management Practice The second street sweeping pecify Best Management Practice The second street sweep Best Management Practice The second street sweep Best Management Practice The second street specify Best Management Practice The se	drop of yard waste at City's	
	Dept. of Public Services Responsible Dept./Person Name Dept. of Public Services Responsible Dept./Person Name	transfer station year round.
	Dept. of Public Services Responsible Dept./Person Name	Specify Measurable Goal
BMP ID#		
(Income by Int by		Hold twice over the 5-year
HOUSEBOID BEZOIDOUS WOSTO		permit term (provided funding
program	Health Dept.	is available).



BRP WM 08A NPDES Stormwater General Permit Notice of Intent for Discharges from Small Municipal Separate Storm Sewer Systems (MS4s)

D. Stormwater Management Program Summary (Cont.)

W040844
Transmittal Number

Facility ID (if known)

Specify Measurable Goal

27 BMP ID#	•	,
Animal control program	Police Dept. Animal Control Officer	Track the number of animals collected (provided funding is
Specify Best Management Practice	Responsible Dept./Person Name	available). Specify Measurable Goal
28 BMP ID#		
Beach Cleanup Program Specify Best Management Practice	Parks & Recreations Dept. Responsible Dept./Person Name	Clean beaches every week between May and September (provided funding is available). Specify Measurable Goal

NOT APPLICABLE

E. Certification

BMP ID#

7. BMPs for Meeting TMDL:

Specify Best Management Practice

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Responsible Dept/Person Name

Stanley J. Usovicz, Jr., Mayor	
Printed Name	
Harly & Son &	7/29/03
Signature	Date

1	
23	1

W040844

Transmittal Number

PERMIT YEAR FOUR PERMIT YEAR FIVE
Spring Summer Fall 06 Winter 06 06-07
90
Fall 05 Winter 05-06
Summer 05
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Summer Fall
Spring Sum 04 0
Winter Sp 03-04
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Summer 03
s spring s
Β.Μ.Ρ. 10 # 0.



Robert Adams, P.E. Metcalf & Eddy, Inc. 30 Harvard Mill Square Wakefield, MA 01880

July 18, 2003

Dear Mr. Robert Adams,

Please accept this letter as an expression of Salem Sound Coastwatch's sincere commitment to continuing to support the City of Salem Department of Public Works' (DPW) efforts to advance stormwater management and reduce nonpoint source pollution.

Salem Sound Coastwatch enjoys a productive, cooperative relationship with the City's DPW staff, and fully expects to strengthen this relationship in the years ahead. Our organization intends to work cooperatively with the Salem DPW to share information, identify areas of concern, develop possible solutions, obtain resources to implement appropriate repairs and/or best management practices, and increase public understanding of the relationships between nonpoint source pollution, stormwater, and coastal water quality. Salem Sound Coastwatch will assist the Salem DPW in this regard to maximum extend possible given the resources available to our organization.

Salem Sound Coastwatch recognizes and applauds the hard work that the City of Salem's DPW has performed in addressing recent stormwater management issues. The Department has been timely, professional, and positive in their responses to the inquiries and concerns of our organization. We consider the Salem DPW a partner in our efforts protect Salem Sound and its watershed by reducing nonpoint source pollution and other environmental threats. We look forward to the continued success of this partnership in the future.

Sincerely,

Robert J. Gough

Director

ENC: SSCW Mission

CC: J. Nerden, Salem DPW

SALEM SOUND COASTWATCH

Protecting the Coastal Habitats of the Salem Sound Watershed with the Communities of Manchester, Beverly, Danvers, Peabody, Salem, and Marblehead.



Our Mission

Salem Sound Coastwatch (SSCW) is a non-profit coastal watershed association that works with government agencies, businesses, other non-profit organizations and citizens from the communities of Manchester, Beverly, Danvers, Peabody, Salem, and Marblehead, Massachusetts. Salem Sound Coastwatch is dedicated to taking cooperative action to protect and enhance the environmental quality of the Salem Sound Watershed. Salem Sound Coastwatch works to achieve this mission through municipal partnering, scientific investigation, education, and stewardship. Our top priorities are protection of coastal habitat, commercial and recreational marine resources, and water quality.

Salem Sound Coastwatch, then named Salem Sound 2000, was established as an informal working group in 1991 when a handful of citizens, local officials, and businesses became concerned with the lack of attention paid to the coastal embayment of Salem Sound. In 1995, the organization became one of the five local governance committees (LGCs) for the Massachusetts Bays National Estuary Program to facilitate regional implementation of the Comprehensive Conservation and Management Plan (CCMP). Within this role, Salem Sound Coastwatch assists the communities in the Salem Sound Watershed with activities such as water quality monitoring, protective bylaw development, grantsmanship, and public education – all with the ultimate goal of helping to shape and implement CCMP actions.

Salem Sound Coastwatch has grown substantially in the past ten years and is now recognized throughout the region for its environmental programs. Salem Sound Coastwatch programs include volunteer monitoring programs (Adopt-a-Tidepool, Wetland Health Assessment Toolbox, Stream Teams, volunteer water quality monitoring), on-the ground restoration projects (anadromous fish habitat restoration and stormwater remediation), public education (beach water quality and stormwater education), and municipal assistance (technical assistance and grant writing).

We are committed to:

- 1. Increasing the public's knowledge and appreciation of the natural resources of the Salem Sound Watershed and the immediate and chronic threats to the ecological health of the watershed.
- 2. Working with the public and private sectors, as well as other non-profit organizations, to foster responsible and sustainable resource management practices in the Salem Sound Watershed.
- 3. Conducting and facilitating environmental monitoring and scientific research in the Salem Sound Watershed and distributing the results to the public.
- 4. Promoting citizens' awareness and understanding of their connection to the Salem Sound Watershed and their role in restoring and protecting its health.

For more information about Salem Sound Coastwatch, including how you can volunteer or how you can become a member, please contact us at:

Salem Sound Coastwatch

201 Washington St., Suite 9 Salem, MA 01970 Phone: 978-741-7900

Fax: 978-741-0458

E-mail: info@salemsound.org Website: www.salemsound.org